Docket No.: HVD2093

A. LOBER PATENT SERVICES

PATENT REPRESENTATION BEFORE THE U.S. PATENT & TRADEMARK OFFICE

OFFICE 978.369.2181 FACSIMILE 978.369.7101 INTERNET lober@lober-patent.com

SEVALDEN STREET CONCORD, MASSACHUSETTS 01742

> MAIL STOP PATENT APPLICATION Commissioner For Patents P. O. Box 1450 Alexandria, VA 22313-1450



NEW NON-PROVISIONAL PATENT APPLICATION TRANSMITTAL

INVENTORS: Jene A. Golovchenko and Haibing Peng

FOR: Carbon Nanotube Device Fabrication

1. Type of Application:

Utility

2. Small Entity:

NO

3. Benefit of Provisional Application under 35 U.S.C. §119(e):

SERIAL NUMBER

FILING DATE

60/422,041

October 29, 2002

| EXPRESS MAIL Mailing L | abel No.: <u>EU642968803US</u> | |
|---|--------------------------------|--|
| Date of Deposit: | October 29, 2003 | |
| with the United State Postal Service "E | | as being enclosed herein are being deposited ce under 37 C.F.R. 1.10 on the date indicated s, Box 1450, Alexandria, VA 22313-1450. |

Theresa A. Lober

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4. Papers Enclosed Which are Required For Filing Date Under 37 C.F.R. §1.53:

This new application is filed with the following papers:

28 sheets of Specification, including claims, abstract and cover sheet

____5 sheets of Informal drawings

5. Oath or Declaration:

Enclosed are 3 pages of an unsigned Declaration.

6. Assignee Indication on Front Page of Application Publication:

This invention is assigned to : <u>President and Fellows of Harvard College, Cambridge, Massachusetts.</u> Please indicate <u>President and Fellows of Harvard College</u> as assignee on the front page of the publication of this application.

7. Figure to be Included on the Front Page of Application Publication:

Please include <u>Figure 5A</u> on the front page of the application publication.

8. Filing Fee Calculation

| For | No. Filed | No. Extra | Sm/Lg Rate | FEE |
|-----------------------|-----------------------|----------------------|-------------|----------|
| Basic Fee: | | | \$385/\$770 | \$770.00 |
| Total Claims: | <u>30</u> - <u>20</u> | = <u>10</u> | \$9/\$18 | \$180.00 |
| Independent Claims: : | <u>02</u> - <u>0</u> | <u>3</u> = <u>00</u> | \$43/\$86 | |
| Multiple Dep. Claims | <u>:</u> NO | | \$145/\$290 | |

TOTAL FILING FEE:

\$950.00

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9. Payment of Fees:

Enclosed is a check in the amount of \$950.00 to cover the filing fee indicated above. Please apply to Deposit Account No. 12-1760 any credits and any additionally required fees beyond those indicated above and as prescribed by 37 C.F.R. §1.16 and §1.17.

10. Correspondence:

Please direct all correspondence to the following:

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11. Return Receipt Postcards

Kindly return the enclosed self-addressed and stamped return post cards.

Respectfully submitted,

Theresa A. Løber

Registration No. 35,253

Agent for Applicants